

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO 10719640

FILING DATE

APPLICANT(S)

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		CLAIMS
	IND	DEP	IND	DEP	IND	DEP	
1							
2							
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49							
50							
TOTAL IND.	1						
TOTAL DEP.	12						
TOTAL CLAIMS	13						

CLAIMS	IND		DEP		IND		DEP		IND		DEP	
	IND	DEP										
51												
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